

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		<b>Docket Number (Optional) 086590-0012</b>	
In re Application of Onoda YOSHIO			
Application Number 10/537,277 – CONF. 2231		Filed May 27, 2005	
For HYGIENIC CAP FOR CANNED DRINK			
Art Unit 3781		Examiner Ned Andrew WALKER	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and appropriate **non-small-entity** fee are as follows (check time period desired):

<input checked="" type="checkbox"/> <b>One month (37 CFR 1.17(a)(1))</b>	\$ <u>130</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ _____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ _____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ _____

☒ **Applicant claims SMALL entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ 65**

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ **The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 500417.**

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

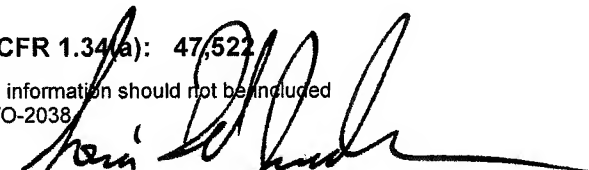
☐ attorney or agent of record. Registration Number: \_\_\_\_\_

☒ **attorney or agent under 37 CFR 1.34(a).**  
Registration number if acting under 37 CFR 1.34(a): 47,522

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

MAY 19, 2010  
Date

General: (212) 547-5400  
Telephone Number

  
 \_\_\_\_\_  
 Signature  
LOUIS J. DELJUIDICE  
 Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.

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